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Bib Data Sheet

CONFIRMATION NO. 8467

<b>SERIAL NUMBER</b> 09/757,774	<b>FILING DATE</b> 01/09/2001 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1646	<b>ATTORNEY DOCKET NO.</b> 07265-124005
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## APPLICANTS

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Renee Z. Dintzis, Baltimore, MD;

## \*\* CONTINUING DATA \*\*\*\*\*

THIS APPLICATION IS A CON OF 08/440,331 05/12/1995  
AND A CON OF 08/440,322 05/12/1995 PAT 6,340,460  
WHICH IS A CON OF 08/391,267 02/21/1995 PAT 6,022,544  
WHICH IS A CON OF 07/808,797 12/17/1991 ABN  
WHICH IS A CIP OF 07/628,858 12/17/1990 ABN  
WHICH IS A CIP OF 07/354,710 05/22/1989 ABN  
WHICH IS A CIP OF 07/248,293 09/21/1988 PAT 5,126,131  
WHICH IS A CON OF 06/869,808 05/29/1986 ABN  
WHICH IS A CON OF 06/460,266 01/24/1983 ABN

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
\*\* 11/09/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MD	SHEETS DRAWING 59	TOTAL CLAIMS 44	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>Dintzis</i> Initials				

## ADDRESS

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## TITLE

Therapeutic suppression of specific immune responses by administration of oligomeric forms of antigen of controlled chemistry

**FILING FEE RECEIVED**  
676

FEES: Authority has been given in Paper  
No. \_\_\_\_\_ to charge/credit DEPOSIT ACCOUNT  
No. \_\_\_\_\_ for following:

<input type="checkbox"/> All Fees
<input type="checkbox"/> 1.16 Fees ( Filing )
<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
<input type="checkbox"/> 1.18 Fees ( Issue )
<input type="checkbox"/> Other _____